

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted OR Declaration
Submitted after initial
Filing
With Initial
Filing
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	2846-006 LAM
First Named Inventor	Milivoje S. Brkovic
COMPLETE IF KNOWN	
Application Number	Unknown/
Filing Date	31 January 2002
Group Art Unit	Unknown
Examiner Name	Unknown

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and true inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ISOLATED DRIVE CIRCUITRY USED IN SWITCH-MODE POWER CONVERTERS

the specification of which (Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(e)(1) or (f), or 385(b) of any foreign application(s) for patent, Inventor's or plant breeder's rights certificate(s), or 386(a) of any PCT international application which designated at least one country other than the United States of America. List below and have also identified below, by checking the box any foreign application(s) for patent, Inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

01/31/02 15:53

NO. 601 P009/014

PTO/SB/01 (10-01)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	00018	OR	<input type="checkbox"/> Correspondence address below
Name					
Address					
City	State		ZIP		
Country		(619) 233-0000	Telephone	(619) 644-1246	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Milivoje S.	Family Name Brkovic or Surname		
Inventor's Signature		Milivoje S. Brkovic		Date 31 January 2002	
Carlsbad	California	USA	Yugoslavia Citizenship		
Residence: City	State	Country			
1202 Plumtree Road					
Mailing Address					
Carlsbad	California	92008	USA		
City	State	Zip	Country		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Inventor's Signature		X		Date	
Residence: City	State	Country	Citizenship		
Mailing Address					
City	State	Zip	Country		
<input type="checkbox"/> Additional inventors are being named on the		supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

Please type a plus sign (+) inside this box →

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. GMB 0881-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	Unknown
Filing Date	31 January 2002
First Named Inventor	Milivoje S. Brkovic
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	2846-006 LAM

I hereby appoint:

Practitioners at Customer Number OR

Practitioner(s) named below:

Name	Registration Number

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.
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Firm or
Individual Name

Address

Address

City

State

ZIP

Country

Telephone

() Fax ()

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.

Total of forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box —

PTO/SB/81 (02-01)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/061,189
Filing Date	02/01/2002
First Named Inventor	Milivoje S. Brkovic
Group Art Unit	2838
Examiner Name	TBA
Attorney Docket Number	13431-22

I hereby appoint:

Practitioners at Customer Number

28221

Place Customer
Number Bar Code
Label here

OR

Practitioner(s) named below:

Name	Registration Number
GLEN E. BOOKS, ESQ.	24,950
JOSEPH M. GELLER, ESQ.	48,144
ALEX R. PAGANO, PATENT AGENT	44,994

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioner(s) at Customer Number.

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Number Bar Code
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OR

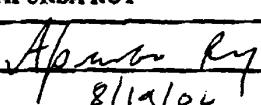
<input checked="" type="checkbox"/> Firm or Individual Name	GLEN E. BOOKS, ESQ.		
Address	LOWENSTEIN SANDLER PC		
Address	65 LIVINGSTON AVENUE		
City	ROSELAND	State	NJ
Country	US		
Telephone	973-597-6162	Fax	973-597-6163

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	APURBA ROY
Signature	
Date	8/12/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

Total of 1 forms are submitted.

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P.03

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PTO/SB/83 (08-00)

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/061,189
Filing Date	1 February 2002
First Named Inventor	MILIVOJE S. BRKOVIC
Group Art Unit	2838
Examiner Name	UNKNOWN
Attorney Docket Number	2646-006

To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are:

The inventor has directed that the file be transferred directly to him. We no longer represent the applicant.

1. The correspondence address is NOT affected by this withdrawal.
2. Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number	<input style="width: 150px; height: 15px; border: 1px solid black;" type="text"/>		<i>Place Customer Number Bar Code Label here</i>
OR			
<input checked="" type="checkbox"/> Firm or Individual Name	Milivoje S. Brkovic, Vice President, R&D, Chief Designer		
Address	di/dt, Inc.		
Address	1822 Aston Avenue		
City	Carlsbad	State	California
Country	USA		
Telephone	760-929-2580	Fax	760-929-2541

This request is enclosed in triplicate (including any attachments).

This request is made on behalf of myself and

- all the attorneys/agents of record;
- the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- the attorneys/agents associated with Customer Number 00616.

Name	Lawrence A. Maxham
Signature	
Date	2 August 2002

NOTE: Withdrawal is effective when approved rather than when received
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.